

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	lin		09-14-01
O.I.P.E. CLASSIFIER	SM		5-20-01
FORMALITY REVIEW	88	1176	7-19-01
RESPONSE FORMALITY REVIEW	CC	JCL114	10-15-01

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
= ..... Allowed I ..... Interference  
— (Through numeral)... Canceled A ..... Appeal  
÷ ..... Restricted O ..... Objected

Claim	Date				
Original	21	5	10	3	
Final	20	14	21	29	
	20	02	02	01	
1	✓	✓	✓	✓	
2	✓	✓			
3	✓				
4	✓				
5	✓				
6	✓				
7	✓				
8	✓				
9	✓				
10	✓				
11	✓				
12	N	N			
13	N	N			
14	N	N			
15	N	N			
16	N	N			
17	N	N			
18	N	N			
19		✓	✓		
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Claim	Date	
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Claim	Date						
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here